

South Carolina
DEPARTMENT OF HEALTH AND HUMAN SERVICES
Post Office Box 8206
Columbia, South Carolina 29202-8206
www.scdhhs.gov
April 6, 2010

Pharm

MEDICAID BULLETIN

TO: Providers Indicated

SUBJECT: Prescription Origin Code

Effective with dates of service on or after May 5, 2010, the South Carolina Department of Health and Human Services (SCDHHS) will require that the prescription origin code be submitted on pharmacy claims for new prescriptions. Claims submitted without the National Council of Prescription Drug Plan (NCPDP) field 419-DJ completed will reject for NCPDP error code 33: Missing/Invalid Prescription Origin Code. In addition, a claim submitted with a "0" (not specified) in the prescription origin code field will also reject.

Claims for refills may be submitted without the prescription origin code, but providers are encouraged to submit this information if they have the means to determine how the prescription was originally transmitted.

The following values will be accepted in the NCPDP field 419-DJ:

- 1 = Written
- 2 = Telephone
- 3 = Electronic
- 4 = Facsimile

If you have any questions regarding this bulletin or any other Medicaid Pharmacy billing and policy questions, please contact your Program Representative at (803) 898-2876. Thank you for your continued support and participation in the South Carolina Medicaid program.

/S/
Emma Forkner
Director

EF/mgwd

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